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FACSIMILE COVER SHEET

TO: UNITED STATES PATENT AND TRADEMARK OFFICE
Examiner: Christopher R. Nalevanko
Group Art Unit: 2611

FROM: Michael K. O'Neill

RE: U. S. Application No. 09/725,815
Our Ref.: 03500.015025

FAX NO.: (703) 872-9306

DATE: May 9, 2005

NO. OF PAGES: 28
(including cover page)

TIME: 4:25

SENT BY: Dawn Mangino

MESSAGE

Attachments:
Transmittal (2 pages) and
Amendment (25 pages).

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Michael K. O'Neill
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In re Application of:

HIDEAKI YUI, et al.

Application No.: 09/725,815

Filed: November 30, 2000

For: TELEVISION RECEIVER

Docket No. 03500.015025

Examiner: Christopher R. Nalevanko

Group Art Unit: 2611

Date: May 9, 2005

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 44	MINUS	** 44	= 0	x \$25 \$50	0
INDEP. CLAIMS	* 18	MINUS	*** 18	= 0	x \$100 \$200	0
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

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Signature

Michael K. O'Neill (Reg. No. 32,622)

Name of person signing certificate

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Michael K. O'Neill
Attorney for Applicants
Registration No.: 32,622

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Form #120

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Page 2 of 2

03500.015025

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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MAY 09 2005

In re Application of:)	
	:	Examiner: Christopher R. Nalevanko
HIDEAKI YUI, et al.)	
	:	Group Art Unit: 2611
Application No.: 09/725,815)	
	:	
Filed: November 30, 2000)	
	:	
For: TELEVISION RECEIVER)	May 9, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated February 9, 2005, please amend the
above-identified application as follows.

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